SCHEDULE E)	PAGE 1 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼
	C C00524454
Check If X 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date
	08 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	Amount
City State Zip Code	1164.71
	Fransaction ID : SE.4695
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Office	Sought: House State: AL Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Check	Resident Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	rrsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date
Mailing Address 325 SPRINGSIDE DR	08 / 22 / Y 2012
	Amount
City State Zip Code AKRON OH 44321	169.30
Purpose of Expenditure VOTER CONTACT CALLS  Category/ OO4	Transaction ID : SE.4696  Sought: House State: AK
Туре	Senate District: 00  President
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Check	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbut 2012	orsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1334.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date 08	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	2012

SCHEDULE E)	PAGE 2 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	C C00524454
Check If X 24-hour report 48-hour report New report Amends report file	d on Mam / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee	Date
INFOCISION MANAGEMENT CORP	08 22 2012
Mailing Address 325 SPRINGSIDE DR	Amount
City State Zip Code	1500.10
AKRON OH 44321	1539.19 Transaction ID : SE.4697
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	ce Sought: House State: AZ Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Dis 2012	bursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date
Mailing Address 325 SPRINGSIDE DR	08 22 2012
	Amount
City State Zip Code AKRON OH 44321	705.84
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	Transaction ID : SE.4698 ice Sought: House State: AR Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
BARAK HUSSEIN OBAMA Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 705.84 Dis	bursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2245.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date	08 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 3 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼  C C00524454
Check If 24-hour report 48-hour report New report Amends report filed	d on Mam / Dab / Yayayay
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP  Mailing Address 325 SPRINGSIDE DR	Date 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code AKRON OH 44321	Amount 9005.61  Transaction ID : SE.4699  ce Sought: House State: CA
VOTER CONTACT CALLS  Voter Contact Category Type  Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District:    CA   Oppose   CA   Oppose
Calendar Year-To-Date Per Election for Office Sought 9005.61 Disl	bursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP  Mailing Address 325 SPRINGSIDE DR	Date  Mos / D D / Y Y Y Y  Amount
City State Zip Code AKRON OH 44321	1231.60 Transaction ID : SE.4700
VOTER CONTACT CALLS  VOTER CONTACT CALLS  Name of Federal Candidate Supported or Opposed by Expenditure:	Ce Sought: House State: CO Senate District: 00 President Oppose
Calendar Year-To-Date Per Election for Office Sought Disl	bursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	10237.21
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed]  Date	08 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E)	PAGE 4 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	
	C C00524454
Check If Z 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	Data
INFOCISION MANAGEMENT CORP	Date
Mailing Address 325 SPRINGSIDE DR	08 22 2012
5 323 SPRINGSIDE DR	Amount
City State Zip Code	990.00
AKRON OH 44321	880.09
Purpose of Expenditure Category/ Office	Transaction ID : SE.4701 e Sought: House State: CT
VOTER CONTACT CALLS  Type  004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
	ck One: Support X Oppose
Calendar Year-To-Date Per Election	ursement For: Primary X General
for Office Sought 880.09	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
INFOCISION MANAGEMENT CORP	
Mailing Address and Oppinion To	08 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	Amount
City State Zip Code	
AKRON OH 44321	222.59
Purpose of Expenditure Category/ Office	te Sought: House State: DE
VOTER CONTACT CALLS  Output  Type  004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
	ck One: Support Oppose
Calendar Year-To-Date Per Election	oursement For: Primary X General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1102.68
	7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
, and the second se	7 7 7
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
SCOTE D MACKENZIE	
SCOTT B MACKENZIE  [Electronically Filed] Date	8 23 2012
Signature	

SCHEDULE E)	PAGE 5 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	
	C C00524454
Check If X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	08 22 2012
5 323 STAINGSIDE DIX	ount
City State Zip Code	
AKRON OH 44321	4773.14
Purpose of Expenditure  Category/  Category/  Office So	usaction ID : SE.4703 ught: House State: FL
VOTER CONTACT CALLS  Output  Type  Output  Type  Output  Type  Output  Type	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
BARAK HUSSEIN OBAMA Check Or	ne: Support X Oppose
Calendar Vear To Date Per Flortion Disbursen	ment For: Primary Keneral
Calefidal Teal-To-Date Fel Liection	Other (specify)
INFOCISION MANAGEMENT CORP	
	08 / 22 / 2012
Mailing Address 325 SPRINGSIDE DR	ount
	lount
City State Zip Code  AKRON OH 44321	2321.23
Tran	nsaction ID : SE.4704 ought: House State: GA
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Office So	Senate Service
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
BARAK HUSSEIN OBAMA  Check Or	ne: Support X Oppose
Calandar Vear To Date Per Flortien Disburser	ment For: Primary 🔀 General
Calendar Year-To-Date Per Election for Office Sought	Other (specify)
ioi cinice coagii	
(a) SUBTOTAL of Itemized Independent Expenditures	7094.37
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Funeralityma	
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
SCOTT B MACKENIZIE	
SCOTT B MACKENZIE  [Electronically Filed] Date 08	23 2012
Signature	

SCHEDULE E)	PAGE 6 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	C C00524454
Check If X 24-hour report 48-hour report New report Amends report filed	I on M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee	Date
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	08 22 2012
525 5. 1.1 155.22 2.1.	Amount
City State Zip Code	339.12
AKRON OH 44321	Transaction ID : SE.4705
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  004	te Sought: House State: HI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 339.12 Disb	oursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	08 22 2012
	Amount
City State Zip Code	366.58
AKRON OH 44321	Transaction ID : SE.4706
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  004	te Sought: House State: ID Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
BARAK HUSSEIN OBAMA	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought J 366.58	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	705.70
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date	N / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

SCHEDULE E)	PAGE 7 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼  C C00524454
Check If X 24-hour report 48-hour report New report Amends report file	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP  Mailing Address 325 SPRINGSIDE DR	Date 08 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code	Amount 3096.24
VOTER CONTACT CALLS	Transaction ID : SE.4707 fice Sought: House State: IL
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 00  President  Support Oppose
Calendar Year-To-Date Per Election for Office Sought Jones 3096.24	sbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date 08 22 2012
Mailing Address 325 SPRINGSIDE DR	Amount
	Transaction ID : SE.4708 fice Sought: House State: IN
VOTER CONTACT CALLS  Outge: 77 Type  Outge: 77	Senate District: 00
BARAN HUSSEIN OBAINA	sbursement For: Primary General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4655.05
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date	08 23 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

SCHEDULE E)	PAGE 8 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼  C C00524454
	M M / D D / Y Y Y Y
Check If 24-hour report 48-hour report New report Amends report file	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date
Mailing Address 325 SPRINGSIDE DR	08
City State Zip Code AKRON OH 44321	740.84 Transaction ID : SE.4709
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  O04	Senate District: 1A Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought T40.84 Dis	bursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date
Mailing Address 325 SPRINGSIDE DR	08
City State Zip Code AKRON OH 44321	680.43 Transaction ID : SE.4710
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Offi	House State: KS Senate District: 00  President
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Che	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	bursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1421.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	08 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 9 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	
	C C00524454
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	to.
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	08 22 2012
5 323 ST KINGGIDE DIK	nount
City State Zip Code	
AKRON OH 44321	1061.03
Districts of Expanditure	nsaction ID : SE.4711 bught: House State: KY
VOTER CONTACT CALLS  Category/ Type  Onice So	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President — 00
BARAK HUSSEIN OBAMA  Check O	ne: Support X Oppose
Caleridal Teal-To-Date Fel Election 1061 03 2012	ment For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	ite
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	08 22 2012
	nount
City State Zip Code	1095.33
AKRON OH 44321	nsaction ID : SE.4712
Purpose of Expenditure Category/ Office So	
VOTER CONTACT CALLS  Type  004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
BARAK HUSSEIN OBAMA Check O	ne: Support X Oppose
Colondar Voor To Date Par Flortien Disburser	ment For: Primary X General
Calendar Year-To-Date Per Election 1095.33 for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2156.36
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
SCOTT B MACKENZIE	
[Electronically Filed] Date 08	23 2012
Signature	

SCHEDULE E)	PAGE 10 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼  C C00524454
Check If 24-hour report 48-hour report New report Amends report filed	I on Mam / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP  Mailing Address 325 SPRINGSIDE DR	Date 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code AKRON OH 44321  Purpose of Expenditure Cotegory/ Office	Amount  335.56  Transaction ID : SE.4713  be Sought: House State: ME
VOTER CONTACT CALLS  VOTER CONTACT CALLS  Output  Type  Output  Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 00  President  Ck One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought Disb 2012	oursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP  Mailing Address 325 SPRINGSIDE DR	Date
	Amount
VOTED CONTACT CALLS	Transaction ID : SE.4714 De Sought: House State: MD
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 00  President  Ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 5 1420.13 Dist	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1755.69
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date  Signature	8 23 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

SCHEDULE E)	PAGE 11 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	C C00524454
	M = M / D = D / Y = Y = Y
Check If 24-hour report 48-hour report New report Amends report filed	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date
	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	
City State Zip Code	Amount
AKRON OH 44321	1642.22 Transaction ID : SE.4715
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	ce Sought: House State: MA
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 00
	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disl	bursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
INFOCISION MANAGEMENT CORP	08 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	2012
	Amount
City State Zip Code AKRON OH 44321	2402.04
	Transaction ID : SE.4716 ce Sought: House State: MI
VOTER CONTACT CALLS  VOTER CONTACT CALLS  O04  Type	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President  Support Oppose
BARAR HUSSEIN OBAINA	
Calendar Year-To-Date Per Election for Office Sought	bursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4044.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL ladace deal Emergithms	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date	08 23 2012
Signature	

SCHEDULE E)	PAGE 12 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	C C00524454
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y
Mailing Address 325 SPRINGSIDE DR  Am	08 22 2012 nount
City State Zip Code	
AKRON OH 44321 Tran	1288.84 nsaction ID : SE.4717
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Office So	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	X President
BARAK HUSSEIN OBAMA Check O	T THE STATE OF THE
Calendar Year-To-Date Per Election for Office Sought 1288.84 Disburser 2012	ment For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	te
Mailing Address 325 SPRINGSIDE DR	08 22 2012
Am	nount
City State Zip Code AKRON OH 44321	706.09
Purpose of Expenditure Category/ Office So	nsaction ID : SE.4718  ought: House State: MS
Туре	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Check O	ne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburser 2012	ment For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1994.93
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date 08	23 2012
Signature	2012

(SCHEDULE E)	PAGE 13 OF 26 FOR SE OF FORM 24/48				
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼				
CONSERVATIVE MAJORITY FUND	C C00524454				
Check If X 24-hour report 48-hour report New report Amends report fi	lled on D D / Y Y Y Y Y Y				
Full Name (Last, First, Middle Initial) of Payee					
INFOCISION MANAGEMENT CORP	Date    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y				
Mailing Address 325 SPRINGSIDE DR	Amount				
City State Zip Code	100000000000000000000000000000000000000				
AKRON OH 44321	1457.18  Transaction ID : SE.4719				
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  O04	Office Sought: House State: MO Senate District: 00				
Name of Federal Candidate Supported or Opposed by Expenditure:	President —				
BARAK HUSSEIN OBAMA C	check One: Support Oppose				
Calendar Year-To-Date Per Election for Office Sought	Other (specify)				
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date				
Mailing Address 325 SPRINGSIDE DR	08				
	Amount				
City State Zip Code AKRON OH 44321	245.85 Transaction ID : SE.4720				
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	Office Sought: House State: MT Senate District: 00				
Name of Federal Candidate Supported or Opposed by Expenditure:	President ————				
BARAK HUSSEIN OBAMA	Check One: Support Oppose				
Calcinal real-10-date for Election	Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	1703.03				
(b) SUBTOTAL of Unitemized Independent Expenditures					
	7 7				
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
SCOTT B MACKENZIE  [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature	20 2012				

SCHEDULE E)	PAGE 14 OF 26 FOR SE OF FORM 24/48			
NAME OF COMMITTE (In Full) CONSERVATIVE MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼  C C00524454			
Check If Z 24-hour report 48-hour report New report Amends report file	ed on Mam / Dab / Yayayay			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP  Mailing Address 325 SPRINGSIDE DR	Date			
City State Zip Code AKRON OH 44321  Purpose of Expenditure Category Off	Amount  438.11  Transaction ID : SE.4721 ice Sought: House State: NE			
VOTER CONTACT CALLS  VOTER CONTACT CALLS  Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 00  President Support Oppose			
Calendar Year-To-Date Per Election for Office Sought Dis 2012	bursement For: Primary General  Other (specify)			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP  Mailing Address 325 SPRINGSIDE DR	Date    M   M   M   Z2			
City State Zip Code AKRON OH 44321	652.62 Transaction ID : SE.4722			
VOTER CONTACT CALLS  Output  Voter Contact Calegory  Type  Output  Name of Federal Candidate Supported or Opposed by Expenditure:	ice Sought:  House State:  Senate District:  President  Support  Support  Oppose			
Calendar Year-To-Date Per Election for Office Sought Dis 201	Sbursement For: Primary General  Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	1090.73			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
SCOTT B MACKENZIE  [Electronically Filed] Date	08 23 2012			

SCHEDULE E)	PAGE 15 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	C C00524454
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 325 SPRINGSIDE DR An	nount
City State Zip Code	
AKRON OH 44321 Trai	328.98 nsaction ID : SE.4723
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Office So	Dught: House State: NH Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Check O	President  One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ment For: Primary General
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	ate
Mailing Address 325 SPRINGSIDE DR	08 22 2012
	nount
City State Zip Code AKRON OH 44321	2147.89 nsaction ID : SE.4724
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Office So	
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Check O	President
	ment For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	2476.87
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date 08	23 2012
Signature	

#### Image# 12972103815 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E) PAGE 16 OF FOR SE OF FORM 24/48 NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼ CONSERVATIVE MAJORITY FUND C00524454 Check If 24-hour report New report 48-hour report Amends report filed on Full Name (Last, First, Middle Initial) of Payee Date INFOCISION MANAGEMENT CORP 22 2012 Mailing Address 325 SPRINGSIDE DR Amount City State Zip Code 495.22 **AKRON** OH 44321 Transaction ID: SE.4725 State: Office Sought: Purpose of Expenditure House NM Category/ VOTER CONTACT CALLS 004 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: X Oppose Check One: BARAK HUSSEIN OBAMA Support ✓ General Disbursement For: Primary Calendar Year-To-Date Per Election 495.22 2012 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date INFOCISION MANAGEMENT CORP 08 2012 Mailing Address 325 SPRINGSIDE DR Amount City State Zip Code 4809.92 ОН **AKRON** 44321 Transaction ID: SE.4726 State: Purpose of Expenditure VOTER CONTACT CALLS Office Sought: House NY Category/ 004 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Oppose Support BARAK HUSSEIN OBAMA **General** Disbursement For: Primary Calendar Year-To-Date Per Election 4809.92 2012 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 5305.14 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE [Electronically Filed] Date 08 23 2012 Signature

#### Image# 12972103816 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E) 17 PAGE OF FOR SE OF FORM 24/48 NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼ CONSERVATIVE MAJORITY FUND C00524454 Check If 24-hour report New report 48-hour report Amends report filed on Full Name (Last, First, Middle Initial) of Payee Date INFOCISION MANAGEMENT CORP 22 2012 Mailing Address 325 SPRINGSIDE DR Amount City State Zip Code 2335.00 **AKRON** OH 44321 Transaction ID: SE.4727 State: Office Sought: Purpose of Expenditure House NC Category/ VOTER CONTACT CALLS 004 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Oppose BARAK HUSSEIN OBAMA Support ✓ General Disbursement For: Primary Calendar Year-To-Date Per Election 2335.00 2012 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date INFOCISION MANAGEMENT CORP 08 2012 Mailing Address 325 SPRINGSIDE DR Amount City State Zip Code 168.82 ОН **AKRON** 44321 Transaction ID: SE.4728 State: Purpose of Expenditure VOTER CONTACT CALLS Office Sought: House ND Category/ 004 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: X Oppose Support BARAK HUSSEIN OBAMA **General** Disbursement For: Primary Calendar Year-To-Date Per Election 168.82 2012 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2503.82 (b) SUBTOTAL of Unitemized Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

(c) TOTAL Independent Expenditures.....

SCOTT B MACKENZIE [Electronically Filed] Date 08 23 2012 Signature

SCHEDULE E)	PAGE 18 OF 26 FOR SE OF FORM 24/48			
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼			
CONSERVATIVE MAJORITY FUND	C C00524454			
Check If $X$ 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP				
Mailing Address 325 SPRINGSIDE DR	08 / 22 / 2012			
An	nount			
City State Zip Code AKRON OH 44321	2804.94			
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004  Office So	<u> </u>			
Name of Federal Candidate Supported or Opposed by Expenditure:	President — —			
BARAK HUSSEIN OBAMA  Check O	one: Support X Oppose			
Calendar Year-To-Date Per Election for Office Sought Disburse 2804.94 Disburse 2012	ment For: Primary General  Other (specify)			
Full Name (Last, First, Middle Initial) of Payee	ote .			
INFOCISION MANAGEMENT CORP	M			
Mailing Address 325 SPRINGSIDE DR				
An	nount			
City State Zip Code AKRON OH 44321	904.79 nsaction ID : SE.4730			
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004  Office So				
Name of Federal Candidate Supported or Opposed by Expenditure:	President ——			
BARAK HUSSEIN OBAMA Check O	one: Support Oppose			
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ment For: Primary General Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	3709.73			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
SCOTT B MACKENZIE  [Electronically Filed] Date 08	23 2012			
Signature				

SCHEDULE E)	PAGE 19 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	
	C C00524454
Check If X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y
Mailing Address 325 SPRINGSIDE DR	08 22 2012
5 323 ST KINGGIDE DIK	nount
City State Zip Code	iloun.
AKRON OH 44321	953.19
Durage of Evanditure	nsaction ID : SE.4731 ought: House State: OR
VOTER CONTACT CALLS  Category/ Type  Onice St	Senate
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Check O	
BARAR HUSSEIN OBAIVIA	
Calciual real-10-Date fel Election	ment For: Primary General
for Office Sought 953.19 2012	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	nte
INFOCISION MANAGEMENT CORP	
	08 22 2012
Mailing Address 325 SPRINGSIDE DR	
	nount
City State Zip Code  AKRON OH 44321	3162.97
Tra	nsaction ID : SE.4732
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	
Type 004	Senate District: 00  President
Name of Federal Candidate Supported or Opposed by Expenditure:	
BARAK HUSSEIN OBAMA Check O	One: Support Oppose
	ement For: Primary Kaneral
for Office Sought 3162.97 2012	Other (specify)
(a) CURTOTAL of Booking discharged by James death Emparatheres	111010
(a) SUBTOTAL of Itemized Independent Expenditures	4116.16
(I) OURTOTAL (II ii i i i i i i i i i i i i i i i i	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
COTT D MACKENZIE	
SCOTT B MACKENZIE  [Electronically Filed] Date 08	23 2012
Signature	

SCHEDULE E)	PAGE 20 OF 26 FOR SE OF FORM 24/48			
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼			
CONSERVATIVE MAJORITY FUND	C C00524454			
Check If X 24-hour report 48-hour report New report Amends report	ort filed on			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date			
IN OCISION MANAGEMENT CONF	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 325 SPRINGSIDE DR	Amount			
City State Zip Code	Autoun			
AKRON OH 44321	263.57 Transaction ID : SE.4733			
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	Office Sought: House State: RI			
	President District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA	Check One: Support Oppose			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  Other (specify)			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date M M / D D / Y Y Y Y			
Mailing Address 325 SPRINGSIDE DR	08 22 2012			
S SECTION OF THE SECT	Amount			
City State Zip Code	1140.33			
AKRON OH 44321	Transaction ID : SE.4734  Office Sought: House State: SC			
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	Senate District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure:	President -			
BARAK HUSSEIN OBAMA	Check One: Support Oppose			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)			
_ L				
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 1403.90			
(b) SUBTOTAL of Unitemized Independent Expenditures	•			
(c) TOTAL Independent Expenditures				
	7 7 7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
SCOTT B MACKENZIE [Electronically Filed] Date	9 08 23 2012			
Signature	20 20 2012			

#### Image# 12972103820 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E) 21 PAGE OF FOR SE OF FORM 24/48 NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼ CONSERVATIVE MAJORITY FUND C00524454 Check If 24-hour report New report 48-hour report Amends report filed on Full Name (Last, First, Middle Initial) of Payee Date INFOCISION MANAGEMENT CORP 22 2012 Mailing Address 325 SPRINGSIDE DR Amount City State Zip Code 196.76 **AKRON** OH 44321 Transaction ID: SE.4735 State: Office Sought: Purpose of Expenditure House SD Category/ VOTER CONTACT CALLS 004 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Oppose BARAK HUSSEIN OBAMA Support **General** Disbursement For: Primary Calendar Year-To-Date Per Election 196.76 2012 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date INFOCISION MANAGEMENT CORP 08 2012 Mailing Address 325 SPRINGSIDE DR Amount Zip Code City State 1556.25 ОН **AKRON** 44321 Transaction ID: SE.4736 State: Office Sought: Purpose of Expenditure VOTER CONTACT CALLS House TN Category/ 004 Type Senate District: 00 President Name of Federal Candidate Supported or Opposed by Expenditure: Check One: X Oppose Support BARAK HUSSEIN OBAMA Primary **General** Disbursement For: Calendar Year-To-Date Per Election 1556.25 2012 for Office Sought Other (specify)

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political
party committee) any political party committee or its agent.

(a) SUBTOTAL of Itemized Independent Expenditures.....

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures.....

SCOTT B MACKENZIE [Electronically I	[Electronically Filed]	Date	08	/	23	1	2012
Signature							

1753.01

SC	CHEDULE E)		PAGE 22 FOR SE OF	OF 26 FORM 24/48
N	AME OF COMMITTE (In Full)	FEC I		ON NUMBER ▼
C	ONSERVATIVE MAJORITY FUND			JK KOMBER V
		C	C00524454	
CI	neck If X 24-hour report 48-hour report New report Amends report filed on	M = M	/ D D /	Y = Y = Y
	Full Name (Last, First, Middle Initial) of Payee			
	INFOCISION MANAGEMENT CORP	М М	/ D D /	Y   Y   Y   Y   Y
	Mailing Address 325 SPRINGSIDE DR	08	22	2012
	Mailing Address 325 SPRINGSIDE DR  Amo	unt		
	City State Zip Code	unit		
	AKRON OH 44321			5930.00
	Office Sou		<b>D : SE.4737</b> House	State: TX
	VOTER CONTACT CALLS  Category/ Type  Onice Sour	giit.	Senate	
			X President	District: 00
	Name of Federal Candidate Supported or Opposed by Expenditure:  RARAK HUSSFIN OBAMA  Check One	٠. ــــــــــــــــــــــــــــــــــــ	Support	X Oppose
	BARAK HUSSEIN OBAMA Check One	<i>"</i>	Оиррогт	Оррозс
	Calendar Year-To-Date Per Election Disbursem	ent For:	Primary	<b>G</b> eneral
	for Office Sought 5930.00 2012	Other (sp	pecify)	
	Full Name (Last, First, Middle Initial) of Payee Date			
	INFOCISION MANAGEMENT CORP			
		<sup>M</sup> 80	22	2012
	Mailing Address 325 SPRINGSIDE DR			
	Amo	unt		
	City State Zip Code			613.76
			D : SE.4738	
	Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type 004	ght:	House	State: UT
	Type 004		Senate	District: 00
	Name of Federal Candidate Supported or Opposed by Expenditure:		Y President	<b>-</b>
	BARAK HUSSEIN OBAMA Check One	e:	Support	Oppose
	Calendar Year-To-Date Per Election Disbursem	ent For:	Primary	General
	613 76   2012	Other (sp	pecify) .	
		(-1		
	(a) SUBTOTAL of Itemized Independent Expenditures			6543.76
	(b) SUBTOTAL of Unitemized Independent Expenditures			
	(c) TOTAL Independent Expenditures			
		-7		
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (in party committee) any political party committee or its agent.			
	SCOTT B MACKENZIE  [Electronically Filed] Date 08	23	201:	Y   Y   Y
	Signature Date 08	23	2012	

SC	CHEDULE E)			AGE 23 OR SE OF	OF 26 FORM 24/48
	AME OF COMMITTE (In Full)		FEC IDE	NTIFICATIO	ON NUMBER ▼
C	ONSERVATIVE MAJORITY FUND		C co	0524454	
C	neck If X 24-hour report 48-hour report New report Amends report		- M /	D   D /	Y I Y I Y I Y
	Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date	M /	D D /	Y   Y   Y   Y
	Mailing Address 325 SPRINGSIDE DR		08	22	2012
	City State Zip Code AKRON OH 44321	Transac	ction ID :	SE.4739	158.57
	Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  004	Office Sough	nt:	House Senate	State: VT District: 00
	Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA	Check One:		President Support	X Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursemer 2012 Ot	nt For: her (speci	Primary  fy)	General
	Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		M /	D	Y Y Y Y
	Mailing Address 325 SPRINGSIDE DR	Amour	08 nt	22	2012
	City State Zip Code AKRON OH 44321	Transa	ction ID :	SE.4740	1978.28
	Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  004	Office Sough	nt:	House Senate	State: VA District: 00
	Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA	Check One:	_	President Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursemer 2012 Ot	nt For:	Primary  fy)	General
	(a) SUBTOTAL of Itemized Independent Expenditures				2136.85
	(b) SUBTOTAL of Unitemized Independent Expenditures	•		7	
	(c) TOTAL Independent Expenditures	•	7	7	
	Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.				
	SCOTT B MACKENZIE  [Electronically Filed] Date Signature	M M /	23	201	2
	•				

(SCHEDULE E)	PAGE 24 OF 26 FOR SE OF FORM 24/48			
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼			
CONSERVATIVE MAJORITY FUND	C C00524454			
Check If 24-hour report 48-hour report New report Amends report	filed on Mam / Dab / Yayayay			
Full Name (Last, First, Middle Initial) of Payee	Date			
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y			
Mailing Address 325 SPRINGSIDE DR	08 22 2012			
City.	Amount			
City State Zip Code AKRON OH 44321	1663.05			
VOTER CONTACT CALLS	Transaction ID : SE.4741  Office Sought: House State: WA			
Type 004	Senate District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure:	President Support Vicence			
BARAK HUSSEIN OBAMA	Check One: Support Oppose			
L Calcillal real-10-Date Fel Election	Disbursement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) of Payee	Date			
INFOCISION MANAGEMENT CORP	M M / D D / Y Y Y Y			
Mailing Address 325 SPRINGSIDE DR	08 22 2012			
	Amount			
City State Zip Code  AKRON OH 44321	465.99			
Description of Franchism	Transaction ID : SE.4742  Office Sought: House State: WV			
VOTER CONTACT CALLS  Category/ Type  O04	Senate District: 00			
Name of Federal Candidate Supported or Opposed by Expenditure:	President			
BARAK HUSSEIN OBAMA	Check One: Support Oppose			
Calendar Year-To-Date Per Election for Office Sought 465.99	Disbursement For: Primary General 2012 Other (specify)			
_ ·				
(a) SUBTOTAL of Itemized Independent Expenditures	2129.04			
(b) SUBTOTAL of Unitemized Independent Expenditures	·			
	7 7 7			
(c) TOTAL Independent Expenditures	<b>•</b>			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
SCOTT B MACKENZIE	M = M / D = D / Y = Y = Y			
[Electronically Filed] Date Signature	08 23 2012			

SCHEDULE E)	PAGE 25 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	C C00524454
Check If X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Lock First Middle Initial) of Davis	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	man / Dad / Yayayay
Mailing Address 325 SPRINGSIDE DR	08 22 2012 mount
City State Zip Code	
AKRON OH 44321	1389.68 nsaction ID : SE.4743
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Office So	ought: House State: WI Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:  BARAK HUSSEIN OBAMA  Check C	President  One: Support X Oppose
BARAN HUSSEIN OBAMA	Support Support
Calendar Year-To-Date Per Election for Office Sought 1389.68 Disburse 2012	ement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	ate
Mailing Address 325 SPRINGSIDE DR	08 / 22 / 2012
Ar	mount
City State Zip Code AKRON OH 44321	137.28
Purpose of Expenditure Category/ VOTER CONTACT CALLS Category/ Type 004	Senate Surviv
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
BARAK HUSSEIN OBAMA Check C	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	1526.96
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(c) TOTAL Independent Experiatores	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date 08	23 2012
Signature	

SCHEDULE E)	PAGE 26 OF 26 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CONSERVATIVE MAJORITY FUND	C C00524454
Check If X 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
5 H.M. (4 + 5 + MCH + 12 D + C)	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP	Date
Mailing Address 325 SPRINGSIDE DR	08 22 2012 Amount
City State Zip Code	
AKRON OH 44321	162.45 Transaction ID : SE.4745
Purpose of Expenditure VOTER CONTACT CALLS  Category/ Type  Office	Sought: House State: DC Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	X President ———
BARAK HUSSEIN OBAMA Check	COne: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbu 2012	rsement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	
	Amount
City State Zip Code	7 7 7
Purpose of Expenditure  Category/ Type  Office	Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	rsement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	162.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	75308.01
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
SCOTT B MACKENZIE  [Electronically Filed] Date 08	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	